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CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

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Lilith E. Rodriguez 01/11/2005
Date

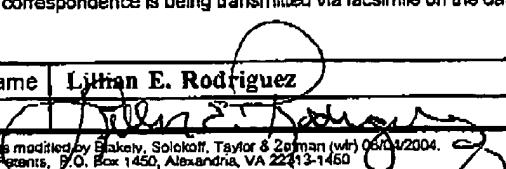
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	10/757,164
		Filing Date	January 13, 2004
		First Named Inventor	Elliot A. Gottfurcht
		Art Unit	3714
		Examiner Name	Corbett B. Coburn
Total Number of Pages in This Submission	6	Attorney Docket Number	4346P001X4

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <ul style="list-style-type: none"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <ul style="list-style-type: none"> <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition <ul style="list-style-type: none"> <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) 	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; min-height: 40px; width: 100%;">Copy of Birth Certificate of Elliot Gottfurcht; Return Receipt Postcard</div>	
		Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Jonathan S. Miller, Reg. No. 48,534 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	January 11, 2005

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Typed or printed name	Lillian E. Rodriguez		
Signature		Date	January 11, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 05/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22213-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

(\$)

Complete if Known

Application Number	10/757,164
Filing Date	January 13, 2004
First Named Inventor	Elliot A. Gottfurcht
Examiner Name	Corbett B. Coburn
Art Unit	3714
Attorney Docket No.	4346P001X4

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code(\$)	Fee Code (\$)		
1051	130	2051 65 Surcharge - late filing fee or oath	
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053 130 Non-English specification	
1251	120	2251 60 Extension for reply within first month	
1252	450	2252 225 Extension for reply within second month	
1253	1,020	2253 510 Extension for reply within third month	
1254	1,590	2254 795 Extension for reply within fourth month	
1255	2,160	2255 1,080 Extension for reply within fifth month	
1401	500	2401 250 Notice of Appeal	
1402	500	2402 250 Filing a brief in support of an appeal	
1403	1,000	2403 500 Request for oral hearing	
1451	1,510	2451 1,510 Petition to institute a public use proceeding	
1460	130	2460 130 Petitions to the Commissioner	
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	
1806	180	1806 180 Submission of Information Disclosure Stmt	
1809	790	1809 395 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810 395 For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____			
SUBTOTAL (2)			(\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Jonathan S. Miller	Registration No. (Attorney/Agent)	48,534	Telephone	(310) 207-3800
Signature				Date	01/11/05

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PATENT
Attorney's Docket No. 4346P001X4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Elliot A. Gottfurcht) Examiner: Corbett B. Coburn
Application No. 10/757,164) Art Group: 3714
Filed: January 13, 2004)
FOR: METHOD AND APPARATUS FOR)
PLAYING VIDEO AND CASINO GAMES)
WITH A TELEVISION REMOTE CONTROL)

PETITION TO MAKE SPECIAL UNDER C.F.R. § 1.102(c)

BOX DAC
Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Applicants hereby Petition to make the above referenced application special under 37 C.F.R. §1.102(c) and MPEP § 708.02 (IV). Attached hereto as evidence of the Applicant's age is a copy of the birth certificate of the Applicant Elliot A. Gottfurcht. Please charge any fees or credit any overpayments to Deposit Account No. 02-2666.

Dated: 1/11/05

By: Jonathan S. Miller
Jonathan S. Miller, Reg. No. 48,534

CERTIFICATE OF TRANSMISSION:

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12400 Wilshire Blvd.
Seventh Floor
Los Angeles, California 90025
(310) 207-3800

Lillian E. Rodriguez

January 11, 2005

**STATE OF MICHIGAN
CERTIFICATE OF LIVE BIRTH**

State File Number: 121-582-0554838

Date Filed: January 8, 1940

Child's Name: Elliot A. Gottfurcht

Date of Birth: December 31, 1939

Gender: Male

Child's Birthplace: Detroit, Wayne County

Mother's Name Before First Married: Helen Graham

Mother's Birthplace: Michigan

Mother's Age: 25

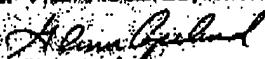
Father's Name: Fred Gottfurcht

Father's Birthplace: Austria

Father's Age: 29

I hereby certify that the above is a true and correct representation of the birth facts on file with the Division for Vital Records, Michigan Department of Community Health.

Certified by:

Glenn Copeland
State Registrar

Date Issued: December 2, 2004

AFS: 856793

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